

February 6, 2008 Bulletin / Technical Assistance Advisory Retire

The Office of the Insurance Commissioner (OIC) issues Bulletins and Technical Assistance Advisories to explain state laws and regulations and offer guidance on compliance issues. The OIC has conducted a review of all of its Bulletins and Technical Assistance Advisories as a component of its ongoing regulatory improvement process. Many of these Bulletins and Technical Assistance Advisories were issued at the request of regulated entities to explain the implementation of recently enacted laws or to address recurring questions. While they were a useful communication tool at the time, it is now appropriate to retire the following 47 Bulletins and Technical Assistance Advisories as they have served their purpose. This action does not indicate any change in the position of the OIC regarding the matters discussed in the retired Bulletins and Technical Assistance Advisories.

Bulletin/TAA #	Topic
71-2	Certificate of Insurance
76-2	Maintenance of an Office in the State of Washington
76-3	Discriminatory Practices with Respect to Insureds using Public Adjusters
78-1	Requirements to be met if Individual Disability Insurance is to Replace Other Insurance
78-6	(1) Use of Receipts to Bind Coverage (2) Statutory Requirement to be met in the Sale of Credit Insurance
78-8	A set of Facts Constituting a Violation of the Rebating and Illegal Inducement Statutes
82-2	Two Items Relating to the Unfair Claims Settlement Practices Regulation
82-6	Investment in a Participation Loan Agreement by a Domestic Insurer
83-4	Credit Insurance (1) Prima Facie Acceptable Rates--Form Filings (2) Policy or Certificate Must be Given to Debtors
83-7	Multiple Employers Trusts (METs)
86-6	Discrimination Against the Blind

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86-8	Notices of Renewal and Changes in Rates or Policy Provisions
87-4	Medigap and Other Health Insurance Matters
87-6	Items Relating to Advertising and Marketing of Life and Health (Including Medicare Supplement) Insurance
88-3	Washington Health Insurance Pool
88-4	Changes to Medicare Supplemental Rates and Forms
90-2	Sale of Unauthorized Health Insurance-Agents Beware
90-3	Public Adjusters-Loss of License for Violation of Law
91-2	Noncompliance with Mandated Offerings & Mandated Benefits, Including an Offering of Benefits for Temporomandibular Joint (TMJ) Disorder
91-4	War Exclusions in Life and Disability Filings
91-7	Procurement of Insurance Coverages from Unauthorized Insurers
91-8	Physician's Limiting Charge--Medicare Supplement
92-2	Apparent Practices that Violate the Medicare Supplement open Enrollment Requirements
92-4	A Summary of Laws and Rules Important to Agents and Brokers
94-9	Application of Premium Tax to Disability and Health Coverage
95-2	Risk-Management Training
95-5	Fraud Plans and Reports
95-6	Procedures for Review and Adjudication of Complaints by Covered Persons
95-8	Procedures for Review and Adjudication of Complaints by Health Care Providers
96-1	Betterment
96-2	True and Actual Reason for Actions
T 97-2	Banks and Insurance
T 98-3	SSB 6565; Victims of Domestic Violence
T 99-2	New rules governing provider relations
T 99-3	Notification to individuals regarding the Washington State health insurance pool
T 99-4	Women's Direct Access
T 2000-02	Provider Contracts and Conflicts between OIC rules and other Federal and State Laws
T 01-01	Washington State compliance with certain provisions of the federal Health Insurance Portability and Accountability Act of 1996 (HIPPA)

T 01-02	Supporting Information for Tier Factors and Rating Factors involving Credit History
T 02-02	USA Patriot Act of 2001
T 02-03	Term Life Products
T 03-01	Rate Filings Related to Insurance Scoring (Credit Scoring)
T 04-03	HB 2014--Alcohol Related Injuries
T 04-07	Travel Insurance
T 05-04	Individuals health plan premium change due to policyholder's age increase to the next higher age bracket
T 05-07	Marketing Activity for the New Medicare Prescription Drug Program
T 05-08	Rate Filing Simplification

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